

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF AIR QUALITY
BUREAU OF PRECONSTRUCTION PERMITS
PO BOX 027, TRENTON, NJ 08625-0027

Let's Protect the Earth

**APPLICATION FOR PERMIT TO CONDUCT
OPEN BURNING OF DANGEROUS MATERIAL**
New Jersey Administrative Code 7:27-2.8

1. Full Business Name _____ Facility ID No. _____
Address _____
No. Street Municipality Zip County
Officer in Charge of Premises – Name _____
Registered Agent (If Company is Legal Entity) _____
Address _____
No. Street Municipality County
2. Type of Business (General Description) _____

3. Municipal Restrictions on Open Burning Yes ____ No ____
If yes, please describe _____
4. Explain proposed operating practice including the type and quantity of dangerous materials to be disposed of by open burning.

5. Indicate Frequency Single ____ Intermittent ____
Describe Fully _____

6. The exact location at which the dangerous material cannot be disposed of by open burning. (Include sketch indicating location and major access road.)

7. Reasons why the dangerous material cannot be disposed of by any other method than by open burning without resulting in a hazard to health and property

8. Explain what measures have been and will be taken to eliminate or reduce the quantity of dangerous material to be disposed of by open burning.

This application is submitted in accordance with the provisions of N.J.A.C. 7:27-2.8, and to the best of my knowledge and belief is true and correct.

Company Name

Signature – all copies

Mailing Address

Name (print or type)

City

Zip Code

Title

Telephone No.

Date of Application

SUBMIT ORIGINAL & FIVE (5) COPIES
ALL FORMS MUST BE NOTORIZED

FOR DEP USE ONLY

Application of Permission to Open Burn Dangerous Materials as set forth is **APPROVED**

ISSUE DATE _____

EXPIRATION DATE _____

PERMIT NO. _____

APPROVED BY _____

Chief, Bureau of Preconstruction Permits